

BEST AVAILABLE COPY

CLAIMS ONLY						SERIAL NO.	FILING DATE		
						APPLICANT(S)			
CLAIMS									
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*	*
	IND.	DEP.	IND.	DEP.	IND.	DEP.			
1	1			1					
2									
3									
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9		1							
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46									
47									
48									
49									
50									
TOTAL IND.			2						
TOTAL DEP.			19						
TOTAL CLAIMS			20						
* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS									